

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	PAG-610
First Named Inventor	Geddes, Pamela A.
COMPLETE IF KNOWN	
Application Number	Herewith
Filing Date	Herewith
Art Unit	TBA
Examiner Name	TBA

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Thermal Transfer Ribbon with Frosting Ink Layer

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor

Given Name	Pamela A.	Family Name	Geddes
(first and middle [if any])		or Surname	

Inventor's
Signature

16/9/03
Date

Alden

NY

US

US

Residence: City

State

Country

Citizenship

Mailing Address 12510 Lesswing Road

Alden
CityNY
State14004
ZIPUS
CountryNAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

Given Name	Barry J.	Family Name	Briggs
(first and middle [if any])		or Surname	

Inventor's
Signature

Date

Kelowna
Residence: CityBC
StateCanada
CountryCanadian
Citizenship

Mailing Address 1078 Mission View Court

Kelowna
CityBC
StateV1Z3R3
ZIPCanada
Country
 Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor

Given Name Pamela A. (first and middle [if any])	Family Name Geddes
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Inventor's
Signature

Date

Alden

NY

US

US

Residence: City

State

Country

Citizenship

Mailing Address **12510 Lesswing Road**

Alden City	NY State	14004 ZIP	US Country
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NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

Given Name Barry J. (first and middle [if any])	Family Name Briggs
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Inventor's
Signature

Date

Baldwinville
Residence: CityB.C.
StateCanada
CountryCanadian
Citizenship

Mailing Address **1078 Mission View Court**

Baldwinville City	<i>B.C.</i> State	<i>PC 13027 ZIP V1Z 3R3</i>	Canada Country
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Additional inventors are being named on the **1** supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <i>Daniel J.</i>		Family Name or Surname <i>Harrison</i>	
Inventor's Signature <i>Daniel J. Harrison</i>		Date	
Residence: City <i>Pittsford</i>	State <i>NY</i>	US Country	US Citizenship
Mailing Address 310 Mendon Center Road			
Mailing Address			
City <i>Pittsford</i>		State <i>NY</i>	ZIP <i>14534</i> US Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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